(3) continue to facilitate the donation and distribution of pork and pork products for humanitarian purposes;

(4) work with the Canadian Government to address the many problems that contribute to the increased export of pork and pork products into the United States;

(5) take appropriate steps to encourage increased use and expansion of the domestic slaughter capacity for hogs;

(6) direct the Secretary of Agriculture, the Attorney General, and the Secretary of Commerce to investigate noncompetitive and antitrust practices in the pork industry;

(7) direct the Secretary of Agriculture to improve price reporting in the domestic livestock industry to ensure fair, open, and competitive markets; and

(8) immediately implement the loan guarantee paperwork reduction regulation of the Secretary of Agriculture that will allow pork producers and lenders to use existing lender documents, rather than creating new documents, when applying for loan guarantees under the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et seq.).

NOTICE OF HEARING

COMMITTEE ON ENERGY AND NATURAL RESOURCESS

Mr. THOMAS. Mr. President, I would like to announce for the information of the Senate and the public that an oversight hearing has been scheduled before the Subcommittee On National Parks, Historic Preservation, and Recreation of the Committee on Energy and Natural Resources. The purpose of this hearing is to review the President's proposal fiscal year 2000 Budget for National Park Service programs and operations.

The hearing will take place on Wednesday, February 24, 1999, at 2 p.m. in room SD-366 of the Dirksen Senate Office Building in Washington, DC.

Because of the limited time available for the hearing, witnesses may testify by invitation only. However, those wishing to submit written testimony for the hearing record should send two copies of their testimony to the Committee on Energy and Natural Resources, United States Senate, SD-364 Dirksen Senate Office Building, Washington, DC 20510-6150.

For further information, please contact Jim O'Toole or Shawn Taylor of the committee staff at (202) 224–6969.

RURAL HEALTH INFRASTRUCTURE

ADDITIONAL STATEMENTS

• Mr. FRIST. Mr. President, the Nation's rural health infrastructure is facing immense pressures. Changes in the private market, Medicare, Medicaid, and costs of new technologies, treatments and education are squeezing many providers out of rural areas. The President's budget shows a surprising lack of sensitivity to the critical realities in these underserved areas.

First, the President would cut reimbursement to hospitals an additional \$9 billion over the next five years. This comes before most providers have had time to absorb the full impact of the Balanced Budget Act. Rural hospitals have lower patient volumes than urban

hospitals, and they serve populations with a larger proportion of seniors, on average, than urban populations. In addition, nearly 20% of rural individuals don't carry health insurance. The burden this imposes on rural providers is intensified by the President's reduction of bad debt payments to hospitals by 10%.

Congress has begun to address these problems, and late last year, we provided \$25 million for state implementation of the Rural Hospital Flexibility Program. This program creates costbased reimbursement for Critical Access Hospitals. The money will help states develop and implement a rural health plan, develop networks, designate Critical Access Hospitals, and to improve rural emergency medical services

I must point out that people in rural areas don't have many choices of health providers. Thirty-seven states have less than 1% enrollment in Medicare risk plans. Often one hospital will serve the needs of many communities interspersed through very large regions. We must take great care to support, rather than destroy, the rural health infrastructure. We may need to reexamine the payment rates to hospitals, but let us do so with good data, and an awareness of the special needs of rural safety net providers.

of rural safety net providers.

In addition, HCFA has not yet adequately educated beneficiaries or resolved the regulatory payment issues surrounding Medicare private plan opportunities in rural areas. We in Congress must continue to monitor the developments in Medicare+Choice, and make the most of opportunities to increase the quality and choice of health care for rural Americans.

The Administration also ignored calls for an increased investment in important programs such as the National Health Service Corps, and Rural Health and Telehealth—flatlining their funding. The Office of Management and Budget also refused a request from the rural health caucus to appropriate additional demonstration grant funding for the development of emergency medical services networks.

At a time when the U.S. needs to prepare itself for emergency response to public health threats, including bioterrorism and identifying and tracking emerging threats such as antimicrobial resistance, President Clinton proposes to eliminate the health professions education programs intended to increase the number of individuals in the public health workforce. These programs include support for retraining existing public health workers, as well as increasing the supply of new practitioners to address priority public health needs.

As Chairman on the Subcommittee on Public Health, I was especially disturbed to find that the President proposes to eliminate programs directed at training primary care physicians and dentists with an emphasis of practicing in rural areas. The President signed my bill reauthorizing these important programs less than three months ago.

Currently \$80 million is spent to assist medical and dental schools in developing programs to train family physicians, general internists, physician assistants, general dentists and pediatric dentists.

There is a demonstrated imbalance between primary care providers and specialists. The key to correcting this imbalance is to provide appropriate incentives at the medical school level to introduce more students to primary care settings during their training. Yet, the President wants to eliminate it.

[Last year's request = \$77 million (\$80 million appropriated)]

COMMUNITY-BASED LINKAGES:

Today, \$54 million is spent to develop and support health professional training programs that link community providers with academic institutions. President Clinton suggests a \$17 million (30%) reduction.

This funding supports:

Area Health Education Centers (AHECs)—support health care in underserved rural and urban areas, including recruitment and support to help rural communities retain health professionals.

Education and Training Relating to Geriatrics—Congress established this program to ensure that our health professionals are trained to meet the needs of seniors. With the aging of the baby boom generation, the number of seniors will double over the next 40 years.

Rural Interdisciplinary Training Grants—supports projects to train, recruit and retain health care practitioners in rural areas.

[Last year's request = \$51 million, \$54 million appropriated, fy'00 request = \$37 million]

I'm disappointed that such important rural programs failed to receive adequate funding under the President's budget proposal. It appears that the Administration would do well to reexamine their commitment to a viable rural health infrastructure, and I urge my colleagues to renew their efforts to protect vulnerable Americans in rural areas.

IN RECOGNITION OF PACZKI DAY

• Mr. LEVIN. Mr. President, I rise today to call my colleagues' attention to one of the most eagerly anticipated holidays each year in my home state of Michigan, Paczki Day.

The day before Lent is known in other parts of the country as Fat Tuesday or Mardi Gras, but in Metro Detroit and in other Michigan communities we celebrate Paczki Day. Paczkis, which are similar to jellyfilled doughnuts, were introduced to Metro Detroit by new immigrants from Poland who settled in the city of Hamtramck, Michigan. Today, thanks to the people of Hamtramck, Michigan is the paczki capital of the United States, with several million dozen paczkis sold every year. The Detroit Free Press reported that in 1993, paczki sales totaled